

## ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

08/28/00

This is to acknowledge that you have filed a **Notification of Hazardous Waste Activity** for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER

NYR000089136

INSTALLATION NAME

PONINGO CLEANERS & DYERS

INSTALLATION ADDRESS -

145 IRVING AVE PORT CHESTER, NY 10573

MAILING ADDRESS →

145 IRVING AVE PORT CHESTER, NY 10573

EPA Form 8700-12AB (4-80)

USEPA - REGION 2 RCRA Programs Branch 290 Broadway, 22<sup>nd</sup> Floor New York, NY 10007-1866

ATTN: JACK HOYT

Tel: (212) 637-4106 Fax: (212) 637-4949

TO: PONINGO CLEANERS & DYERS or Current Occupant

ATTN: HAFIZ, MICHAEL - OWNER

**145 IRVING AVE** 

PORT CHESTER, NY 10573

Please refer to the Instructions for Filing Netification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery 3ct)



## Notification of Regulated Waste Activity

Date Received (For Official Use Only)

required by law (Section 3010 of the Resource Conservation AMS BRANCH and Recovery Act). United States Environmental Protection Agency I. Installation's EPA ID Number (Mark 'X' in the appropriate box) C. Installation's EPA ID Number B. Subsequent Notification A. First Notification (complete item C) II. Name of Installation (Include company and specific site name) C III. Location of Installation (Physical address not P.O. Box or Route Number) Street Street Street (continued) St. 2" City or Town State ZIP Code All the continue of well a second County Code County Name IV Installation Mailing Address (See Instructions) Street or P.O. Box City or Town State : Valustallation Contact (Person to be contacted regarding waste activities at site) Name (last) (first) Phone Number (area code and number) VI. Installation Contact Address (See Instructions) A Contact Address B Street or P.O. Bo City or Town ZIP Code and the Trick State : VII. Ownership (See instructions) A. Name of Installation's Legal Owner Ser Web City or Town State ZIP Code OR C. Owner Type B. Land Type Phone Number (area code and number)

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